/\_

DATENT	APPLICATION	<b>FEE DETERMIN</b>	IATION RECORD
PAILINI	AFFLICATION		

Effective October 1, 2000												
							SM TY	IALL EN		OR	OTHER SMALL I	
TOTAL CLAIMS		14					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		) 4 minus 20=		$\cdot \not Q$			X\$ 9=	•	OR	X\$18=		
INDEPENDENT CLAIMS		6 mil	nus 3 =	' '3			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							⊦135=		OR	+270=		
* If the difference in column 1 is less than zero, enter				r "0" in c	olumn 2		OTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										OTHER		
		(Column 1)		(Colu		(Column 3)	. <u> </u>	MALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IDM	Total	•	Minus	**		н	]   :	X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	***	-	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		J   _	+135=	,	OR	+270=	
								TOTAL		ł	TOTAL	
							AD	DIT. FEE		OR	ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	<u>ا</u>					
AENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	1	X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	T OL A IVA	= -	4 [	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]	+135=		OR	+270=		
							AE	TOTAL DIT. FEE		OR	ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3	)					
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT C	Total	•	Minus	**		=	<b>」</b> 「	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		]=	┧┞	X40=		OF	X80=	
Ľ	FIRST PRESI	ENTATION OF M	MULTIPLE DE	PENDE	NT CLAIM		┙┞	+135=		1		<del>                                     </del>
	If the entry in colu	ımn 1 is less than	the entry in co	iumn 2, wr	ite "0" in o	olumn 3.	L	+135= TOTAL		OR	` L	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Application or Docket Number